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022434      7590      07/10/2006  
**BEYER WEAVER & THOMAS, LLP**  
P.O. BOX 70250  
OAKLAND, CA 94612-0250  
09/26/2006 JBALINA2 00000038 10737022

01 FC:1501      1400.00 OP  
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Sue Funchess	(Depositor's name)
<i>Sue Funchess</i>	
September 21, 2006	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/737,022	12/15/2003	Camelia Rusu	LAM1P180/P1170X	5595

TITLE OF INVENTION: HIGH ASPECT RATIO ETCH USING MODULATION OF RF POWERS OF VARIOUS FREQUENCIES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	10/10/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
ANGADI, MAKI A	1765	216-067000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 <u>Beyer Weaver &amp; Thomas</u> LL
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		2 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Lam Research Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Fremont, California 94538

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

- Issue Fee  
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 The Director is hereby authorized to charge any additional fees the required fees, any deficiency, or credit any overpayment, to Deposit Account Number 50-0388 (enclose an extra copy of this form).

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date August 28, 2006

Typed or printed name Michael Lee

Registration No. 31,846

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